

Department of Public Health and Social Services
Division of Environmental Health
Food Establishment Inspection Report

Page 1 of 5

INSPECTION	RSN	TYPE	GRADE	INSPECTION DATE		ESTABLISHMENT NAME	
Regular	✓	✓	19	11 / 20 / 2018		Charlotte Ballroom	
Follow-up				TIME IN	TIME OUT	PERMIT HOLDER	
Complaint			RATING	3:00 PM	6:00 PM	Lotte Hotel Guam, LLC	
Investigation			B	SANITARY PERMIT NO.		LOCATION (Address)	
Other:				180001540		Lot 5052 #185 Gun Beach Road Tamuning	
ESTABLISHMENT TYPE			AREA	TELEPHONE	No. of Risk Factor/Intervention Violations		RISK CATEGORY
Catering			5	646-6811	2		3
					No. of Repeat Risk Factor/Intervention Violations		
					0		

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle or mark "X" designated compliance (IN, OUT, N/O, N/A) for each numbered item. Mark "X" in appropriate box for COS and/or R.

IN = In compliance OUT = Not in compliance N/O = Not observed N/A = Not applicable COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit points

Compliance Status			COS	R	PTS
Supervision					
1	<input checked="" type="checkbox"/> OUT	Person in charge present, demonstrates knowledge, and performs duties			6
Employee Health					
2	<input checked="" type="checkbox"/> OUT	Management awareness; policy present			6
3	<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction & exclusion			6
Good Hygienic Practices					
4	<input checked="" type="checkbox"/> OUT N/A N/O	Proper eating, tasting, drinking, betelnut, or tobacco use			6
5	<input checked="" type="checkbox"/> OUT N/A N/O	No discharge from eyes, nose, and mouth			6
Preventing Contamination by Hands					
6	<input checked="" type="checkbox"/> OUT N/A N/O	Hands clean and properly washed			6
7	<input checked="" type="checkbox"/> OUT N/A N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed			6
8	IN <input checked="" type="checkbox"/> OUT	Adequate handwashing facilities supplied & accessible			6
Approved Source					
9	<input checked="" type="checkbox"/> OUT	Food obtained from approved source			6
10	IN OUT N/A <input checked="" type="checkbox"/>	Food received at proper temperature			6
11	<input checked="" type="checkbox"/> OUT	Food in good condition, safe, and unadulterated			6
12	IN OUT <input checked="" type="checkbox"/> N/A N/O	Required records available: shellstock tags, parasite destruction			6
Protection from Contamination					
13	IN <input checked="" type="checkbox"/> OUT N/A	Food separated and protected			6
14	<input checked="" type="checkbox"/> OUT N/A	Food contact surfaces: cleaned & sanitized			6
15	<input checked="" type="checkbox"/> OUT	Proper disposition of returned, previously served, reconditioned, and unsafe food			6
Potentially Hazardous Food (TCS Food)					
16	IN OUT N/A <input checked="" type="checkbox"/>	Proper cooking time and temperatures			6
17	IN OUT N/A <input checked="" type="checkbox"/>	Proper reheating procedures for hot holding			6
18	IN <input checked="" type="checkbox"/> OUT N/A N/O	Proper cooling time and temperature		<input checked="" type="checkbox"/>	6
19	IN OUT N/A <input checked="" type="checkbox"/>	Proper hot holding temperatures			6
20	<input checked="" type="checkbox"/> OUT N/A	Proper cold holding temperatures			6
21	<input checked="" type="checkbox"/> OUT N/A N/O	Proper date marking and disposition			6
Consumer Advisory					
22	IN OUT <input checked="" type="checkbox"/>	Consumer Advisory provided for raw or undercooked foods			6
Highly Susceptible Populations					
23	IN OUT <input checked="" type="checkbox"/>	Pasteurized Foods used; prohibited foods not offered			6
Chemical					
24	IN OUT <input checked="" type="checkbox"/>	Food additives: approved and properly used			6
25	<input checked="" type="checkbox"/> OUT	Toxic substances properly identified, stored, used			6
Conformance with Approved Procedures					
26	IN OUT <input checked="" type="checkbox"/>	Compliance with variance, specialized process, and HACCP plan			6

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health interventions are control measures to prevent foodborne illness or injury.

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

Mark "X" in box: If numbered item is not in compliance and/or if COS and/or R. COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit points

Compliance Status			COS	R	PTS
Safe Food and Water					
27		Pasteurized eggs used where required			1
28		Water and ice from approved source			2
29		Variance obtained for specialized processing methods			1
Food Temperature Control					
30		Proper cooling methods used; adequate equipment for temperature control			1
31		Plant food properly cooked for hot holding			1
32		Approved thawing methods used			1
33		Thermometer provided and accurate			1
Food Identification					
34		Food properly labeled; original container			1
Prevention of Food Contamination					
35	<input checked="" type="checkbox"/>	Insects, rodents, and animals not present			2
36		Contamination prevented during food preparation, storage & display			1
37		Personal cleanliness			1
38		Wiping cloths: properly used and stored			1
39		Washing fruits and vegetables			1
I have read and understand the above violation(s), and I am aware of the corrective measures that shall be taken.					
Proper Use of Utensils					
40		In-use utensils: properly stored			1
41		Utensils, equipment and linens: properly stored, dried, handled			1
42		Single-use/single-service articles: properly stored, used			1
43		Gloves used properly			1
Utensils, Equipment and Vending					
44	<input checked="" type="checkbox"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used			1
45	<input checked="" type="checkbox"/>	Warewashing facilities: installed, maintained, used; test strips			1
46	<input checked="" type="checkbox"/>	Nonfood-contact surfaces clean			1
Physical Facilities					
47		Hot & cold water available, adequate pressure			2
48		Plumbing installed; proper backflow devices			2
49		Sewage and wastewater properly disposed			2
50		Toilet facilities: properly constructed, supplied, & cleaned			2
51		Garbage/refuse properly disposed; facilities maintained			2
52	<input checked="" type="checkbox"/>	Physical facilities installed, maintained, and clean			1
53	<input checked="" type="checkbox"/>	Adequate ventilation and lighting; designated areas use			1
Documents and Placards					
54		Sanitary Permit, Health Certificates valid and posted			NA

Person in Charge (Print and Sign) YES REYES-BARRERA ERSUM

Date: 11/20/18

DEH Inspector (Print and Sign) R. ORIONDO, EPHO I GU / V. RAYMUNDO, EPHO I

Follow-up (Mark one): YES ☒ NO ☐ Follow-up Date NONE

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Page 2 of 5

ESTABLISHMENT NAME Charlotte Ballroom		LOCATION (Address) Lot 5052 #185 Gun Beach Road Tamuning
INSPECTION DATE 11 / 20 / 2018	SANITARY PERMIT NO. 180001540	PERMIT HOLDER Lotte Hotel Guam, LLC

TEMPERATURE OBSERVATIONS

Item/Location	Temperature (° F)	Item/Location	Temperature (° F)
Thermometer in reach-in chiller	46.0/50.0		
Cut pork/Reach-in chiller	29.5		
Cooked Pasta/Reach-in chiller	40.5		
Sliced ham/Reach-in chiller	41.5		
Sliced salami/Reach-in chiller	44.0		
Cut honey dew/Walk-in chiller	42.5		
Cut melon/ Walk-in chiller	41.4		
Hard Boiled Shelled Egg (cooling)/Walk-in chiller	64.0		
Final rinse/Automatic dishwasher	145.0		

ITEM NO.	OBSERVATIONS AND CORRECTIVE ACTIONS	CORRECT BY DATE
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Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.

	A regular inspection was conducted today. No previous inspection was conducted.	
	The following violations were observed:	
8	Hot water not provided at both hand wash sinks in the kitchen; automatic paper towel dispenser not working; hand wash sink faucet observed leaking. Adequate handwashing sinks shall be provided, kept in good repair, and properly supplied with hot water, and clean paper towels/hand dryer to encourage food handlers to properly wash their hands.	None
13	Ice found in ice maker/bin with dark stains. Food shall be protected to prevent cross-contamination from occurring.	None
18	Hard boiled eggs did not properly cool. *COS: Person-in-charge (PIC) discarded bowl of hard boiled shelled eggs. Potentially Hazardous Food (PHF)/Time/Temperature Control for Safety (TCS) food shall be properly cooled within the required time-frame to prevent the growth of pathogens or toxin formation.	COS
35	Multiple live and dead cockroaches of different sizes were observed throughout the kitchen and storage areas, multiple dry rodent droppings found under the shelves in the non-food (single	None

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections.

Person In Charge (Print and Sign) <i>JOS ROYKS - BUNARION</i> <i>EPS</i>	Date: 11/20/18
DEH Inspector (Print and Sign) <i>R. ORIONDO, EPHO</i> / <i>V. RAYMUNDO, EPHO</i>	Date: 11/20/18

**Department of Public Health and Social Services
Division of Environmental Health**

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Page 3 of 5

ESTABLISHMENT NAME Charlotte Ballroom		LOCATION (Address) Lot 5052 #185 Gun Beach Road Tamuning
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	service articles) storage area; general openings found on the around pipes of the handwashing sink, around gas pipes, on the ceiling of the automatic dishwasher, and missing drain cover near reach-in chillers.	
	Pest control service reports dated 11/1/18 and 11/14/18 were provided by the PIC. Most recent pest control report indicated minimal German roach activity. Pest control contract indicated twice a month treatments, with on-call services as needed.	
	Based on these observations and evidence, it appears an active cockroach and rodent infestation is present in the establishment, which constitutes an imminent health hazard.	
	The presence of pests shall be controlled, all outer and general openings shall be sealed to prevent the accessibility of pests and the contamination of food and clean equipment/utensils.	
44	Metal food carts observed with rust.	None
	Food and nonfood-contact surfaces shall be smooth, easily cleanable, non-absorbent, properly designed, and maintained to ensure surfaces can be properly cleaned and sanitized, and cross-contamination is prevented.	
46	Food debris observed on surfaces of metal food carts; grease build-up and dirt observed on the surfaces of stoves and exhaust vents.	None
	Nonfood contact surfaces shall be cleaned and maintained as often as necessary to prevent cross-contamination from occurring.	
45	Hot water not provided at the ware washing sinks.	None
	Hot and cold running water shall be provided at the warewashing sinks to ensure equipment and utensils are properly cleaned.	
52	Food debris, dirt, and rubbish found under the shelves of the dry storage area and the non-food storage area, under the chillers and freezers, and on the floor of the kitchen.	None
	Physical facilities shall be maintained and cleaned as often as necessary to minimize the attraction of pests, prevent physical hazards, and promote the overall sanitation of the establishment	

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections.

Person in Charge (Print and Sign) <i>TES KERRY BURMAN</i>	Date: 11/20/18
DEH Inspector (Print and Sign) <i>R. ORIONDO, EPHD</i> / <i>V. RAYMUNDO, EPHD</i>	Date: 11/20/18

Page 4 of 5

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Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.

[illegible]

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections.

Person In Charge (Print and Sign)	<i>JES ROYES - BARRERA</i>	Date:	11/20/18
DEH Inspector (Print and Sign)	<i>R. ORIONDO, EPHO I</i> <i>Qn</i> <i>V. RAYMUNDO, EPHO I</i>	Date:	11/20/18

**Department of Public Health and Social Services (DPHSS)
Division of Environmental Health (DEH)**

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Page 5 of 5

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ITEM NO.	OBSERVATIONS AND CORRECTIVE ACTIONS	CORRECT BY DATE
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Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.

	Based on observations and evidence, it appears that there is an active rodent and cockroach infestation in the establishment, which constitutes an imminent health hazard. Per the GFC, an imminent health hazard is a significant threat or danger to public health that exists when there is evidence sufficient to show that a product, circumstance, or event creates a situation that requires immediate correction or cessation of operation to prevent injury.	
	The establishment's Sanitary Permit is hereby suspended until all cited violations have been corrected and the following additional requirements, pursuant to GFC Section 8-102.10, to address the pest infestation are met:	
	1. Written documentation to be submitted daily to DPHSS-DEH from the establishment's primary pest control company (PCC) regarding each of the services provided, which MUST INCLUDE , but not limited to, the following:	
	A. Name of pesticide used ;	
	B. Number of baits, traps, and other methods used;	
	C. Location of application; and	
	D. Observations of each service conducted.	
	2. A written cleaning schedule from the establishment that indicates the following:	
	A. Areas that will be cleaned and sanitized;	
	B. How it will be cleaned and sanitized; and	
	C. The frequency or how often it will be done.	
	3. Seal all openings of the establishment to prevent the entrance and travel of the pest with pest-proof materials, such as metal.	
	4. Remove or prevent any access to food and/or water:	
	A. Food that is not bottled or canned must be placed in pest-proof containers, such as metal, glass, or heavy-gauge plastic containers, prior to storage or when not in use, and	
	B. Place food-contact utensils and equipment in pest-proof containers prior to storage or when not in use.	
	5. Sanitize all hard surfaces and food-contact surfaces daily in food preparation areas prior to operation.	
	An official follow-up inspection WILL NOT BE CONDUCTED until the establishment can provide three-consecutive days of no activity observed from their PCC, and/or by DPHSS-DEH, and all violations cited and additional requirements stated above are met.	
	An assessment may be conducted by DPHSS-DEH, or requested by the establishment, and will be scheduled and conducted at the inspector's earliest available schedule.	

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections.

Person in Charge (Print and Sign) <i>TES KEYES - BURRIER</i>	Date: 11/20/18
DEH Inspector (Print and Sign) <i>R. ORIONDO, EPHO I / V. RAYMUNDO, EPHO I</i>	Date: 11/20/18



EDDIE BAZA CALVO
GOVERNOR

RAY TENORIO
LIEUTENANT GOVERNOR

GOVERNMENT OF GUAM

DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
DIPATTAMENTON SALUT PUPBLEKO YAN SETBISION SUSIAT



LEO G. CASIL
ACTING DIRECTOR

Date: 11/20/18

CHARLOTTE BALLROOM (CATERING)
Name of Establishment

As a result of this inspection your establishment received a:

☐ LETTER OF WARNING

(Demerit/Grade Points)

Once you have corrected all violations cited on your establishment's inspection report, you must provide us a written request for re-inspection to include a description of the corrective measures that you have implemented. If we do not receive a written re-inspection request from you, we will conduct a follow-up inspection after ten (10) calendar days from the official receipt of this notice to ensure that corrective measures have been taken.

Failure to correct violations may result in the closure of your establishment pursuant to section 21109(b) of 10GCA, Chapter 21.

☒ NOTICE OF CLOSURE

(Demerit/Grade Points)

19/B (COCKROACH & RODENT INFESTATION)

Once you have corrected all violations cited on your establishment's inspection report, you must provide us a written request for re-inspection to include a description of the corrective measures that you have implemented. Unlike an establishment who has received a letter of warning, an establishment shall remain closed unless a written request for re-inspection is made. Under 10 GCA Ch. 21 §21109(b), suspension without prior hearing may be imposed until the violation is corrected. You may also request a hearing to the Division of Environmental Health within five (5) calendar days of the date of this notice. When a hearing is requested following a suspension without prior hearing, it shall be discretionary with the Director as to whether the suspension shall be continued pending the hearing.

We look forward to working closely with you as partners in promoting health and sanitary practices on Guam. If you need further assistance, you can reach us at 735-7221 or (fax) 734-5556. Si Yu'us Ma'ase.

Sincerely,

for LEO G. CASIL
Acting Director

Issued By:

R. ORIONDO / V. RAYMUNDO
Name of EPHO
EPHO I

Received By:

TES ROYCE BURRER
Establishment Representative